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**May 4, 2020**

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*Welcome to America's Physician Groups' "Healthcare on the Hill," where you can get the latest on healthcare happenings in our nation's capital--and with a special focus on the value-based care movement.*

*As our nation--and the world--continues to face the many challenge presented by COVID-19, we are working to ensure you have the very latest information on the virus and our rapidly changing healthcare landscape.*

*Think someone else may enjoy "Healthcare on the Hill?" **Forward this email and have them click [here](#) to be added to our subscription list.** And remember, you can always visit our [website](#) for more news and resources.*

**Valinda Rutledge**  
**Senior Vice President of Federal Affairs**  
**America's Physician Groups**

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### **CMS Announces More Regulatory Changes in Response to the COVID-19 Public Health Emergency**

Last week, the Centers for Medicare & Medicaid Services (CMS) [released](#) another set of regulatory waivers for healthcare facilities and providers during the COVID-19 public health emergency (PHE) in addition to a new interim final rule with comment period. The interim

final rule included numerous policies aimed at providing financial relief and stability for accountable care organizations (ACOs) including:

- Forgoing an application cycle for MSSP in 2020 for an agreement start date of January 1, 2021 and allow MSSP ACOs whose current agreement periods expire on December 31, 2020 the option to extend their existing agreement period by one year
  - Including Track 1+ Model ACOs
- Allowing MSSP ACOs in the BASIC track's glide path the option to elect to maintain their current level of participation for performance year (PY) 2021 starting June 18, 2020
  - Anticipated final date to make these elections is September 22, 2020
- Clarifying the applicability of the program's extreme and uncontrollable circumstances policy to mitigate shared losses for the period of the COVID-19 PHE by clarifying that the months affected extend back to January 2020
- Expanding the definition of primary care services for purposes of determining beneficiary assignment to include telehealth codes for virtual check-ins, e-visits, and telephonic communication
- Excluding from Shared Savings Program calculations all Parts A and B fee-for-service (FFS) payment amounts for an episode of care for treatment of COVID-19, triggered by an inpatient service, and as specified on Parts A and B claims with dates of service during the episode
- Adjusting benchmark expenditures for other factors in order to remove COVID-19-related expenditures from the determination of benchmark expenditures

CMS' newest round of waivers provides greater flexibility for telehealth services including:

- Allowing practitioners other than doctors, nurse practitioners, physician assistants, and certain others to deliver telehealth services including physical therapists, occupational therapists, and speech language pathologists
- Allowing hospitals to bill for services furnished remotely by hospital-based practitioners to Medicare patients registered as hospital outpatients, including when the patient is at home when the home is serving as a temporary provider-based department of the hospital
- Expanding the list of services conducted by audio-only telephone between beneficiaries, their doctors, and other clinicians that are eligible for payment to include many behavioral health and patient education services
- Increasing payments for telephone visits to match payments for similar office and outpatient visits, retroactive to March 1, 2020

- Paying for Medicare telehealth services provided by rural health clinics and federally qualified health clinics
- Waiving the video requirement for certain telephone evaluation and management services and adding them to the list of Medicare telehealth services

**APG and Premier** sent a joint letter to CMS applauding the agency for its efforts to strengthen APMs during this health crisis but recommends additional modifications such as providing a one-time incentive to two-sided risk entities and considering all clinicians in downside risk entities in 2020 to have met the QP threshold and receive the MACRA bonus. You can view the letter [here](#).

### **APG Joins Coalition Letter to Congress on Stabilization of 2021 Medicare Advantage Rates**

In conjunction with the Better Medicare Alliance (BMA), APG sent a letter to Congress requesting that the agency take steps to stabilize 2021 Medicare Advantage (MA) rates ahead of the June 1 deadline for 2021 MA bids. Recommendations in the letter included excluding costs for vaccine and COVID-19 treatments from 2021 bids as well as guidance for plans on how to navigate the COVID-19 pandemic. These recommendations are designed to lessen the uncertainty around MA during this time and avoid increases in premiums and decreases in supplemental benefits in the coming year. You can find the letter [here](#).

### **APG and CareJourney Deep Dive on the Future of APMs**

[Register today](#) for a **Deep Dive Webinar** hosted by [APG](#) and [CareJourney](#) on Thursday, May 21 at 2pm ET. We have secured a group of **industry experts** who will provide you with unique insights into what risk-based care will look like as the fight against COVID-19 continues and what factors are they considering as they think about their 2021 risk-based strategy.

#### **Here are a few of the topics our group of panelists will discuss:**

- *What is the future state of risk-based models in a post-COVID-19 world?*
- *What is the continued value offered by staying in risk-based models in the face of COVID-19?*
- *What factors should we consider when determining how to move forward in risk-based care?*

**Our expert panelists include:**

- **Marion Couch, Senior Medical Advisor, Office of the Administrator, Centers for Medicare & Medicaid Services**
- **Steve Neorr**, Chief Administrative Officer, Triad HealthCare Network
- **Melanie Matthews**, CEO, Physicians of Southwest Washington
- **Pamela M. Pelizzari**, Principal and Healthcare Consultant, Milliman

We will also review the [interim final rule](#) released on April 30 which includes policies aimed at providing financial relief and stability for ACOs.

**[SPACE IS LIMITED. CLICK HERE TO REGISTER](#)**

As the COVID-19 pandemic continues, APG remains a strong advocate for our members serving on the front lines of this healthcare crisis. Click [here](#) for a complete list of letters to legislative, executive, and agency officials in support of our members and other health providers. You can also find additional resources on our [COVID-19 webpage](#).



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This message was sent to [dallen@apg.org](mailto:dallen@apg.org) from:

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